degree of adjustment of the handle 12 which is necessary will depend upon the particular length of the tube 5 being employed. In Figure 3 the manner in which the arms 10 distend and flatten the distal portion of the tube 5 will be apparent. After externally lubricating the tube 5, the assembly of Figure 2 will be held in one hand by grasping the handle 12 in a manner similar to that in which an ordinary pencil is held while writing. The tube 5, thus conditioned, may then be readily inserted into the trachea, no difficulty being experienced in directing the tube between the vocal chords. When intubation has been properly accomplished, the stylet is withdrawn from the tube, and the latter may then be coupled to the associated apparatus for supplying oxygen or other gas to the lungs through the inserted tube.

It will be understood that changes in the details herein described and illustrated may be made by those skilled in the art without departing from the spirit and scope of the invention as claimed.

Having described the invention, what is claimed as new is:

1. A stylet for an endotracheal tube comprising a stiff elongated rod having an anteriorly curved distal portion, and an elongated axially bored handle slidably adjustable on the proximal portion of said rod and having a reduced distal portion adapted to make a close sliding fit within the proximal end of the tube, the distal portion of the rod being composed of a pair of forwardly diverging spring arms tensioned to spring apart so as to fix and antero-posteriorly distend and laterally flatten the distal portion of the tube into a cross sectional form substantially similar to the shape of the laryngeal opening.

2. The construction defined in claim 1, wherein the rod is flattened at one side, in combination with a set screw carried by the handle and engageable with the flat side of the rod to secure the handle in adjusted position and positively prevent relative rotation of the rod and handle.

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